

An
Inaugural Essay,
on
Hydrothorax
Submitted to the Provost.
And Medical Faculty
of the
University of Pennsylvania
for
The Degree of M.D.
by
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of Virginia

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1840

Hydrogates. These
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Hydrothorax

It is a fact well established among Physiologists. That when the system is in a healthy and undisturbed condition. There is constantly pouring into every cavity and interstices of the body, a watery fluid which without being permitted to accumulate to any extent, is taken up and carried off, by a set of vessels appropriated for that purpose. But it occasionally happens, that the quantity of this fluid, is pathologically increased in some one of the cavities in the system, producing the disease termed Dropsy. And is then by Symplozical writers designated by different appellations; according to the particular cavity or interstices, in which this unusual accumulation may be present. And hence we must with Anasarca, Ascites, Hydrocephalus Internus and Hydrothorax or it is called by some Hydrops. Siccus. The last of which is that form of Dropsy I shall consider in this dissertation.

My Notes

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Hydrothorax, or as it is termed by some
Medicists Hydrope Pectoris, is defined to be a spontaneous
collection of a watery fluid in the chest, and is derived from
the Greek words *Hydro* water and *Thorax* the chest

Of all the different forms of Dropsy, to which the
human system is liable this is considered to be by far
the most formidable; And by the generality of writers is
regarded as a disease perfectly incurable; admitting under
the most favourable circumstances but of a casual and
temporary relief from medicine. This opinion however
appears obviously to have originated from an incorrect
view of its pathology. For by almost all the European
Practitioners it is most strenuously maintained; that this
with the other forms of Dropsy is a disease originating
in debility, and associated with what they term, a cach-
ectic condition of the system. And necessarily requiring
for its cure the tonics and stimulating remedies.
To be convinced of the fallacy of this opinion we need
only refer to the fatality which almost invariably

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resulted from a practice founded upon such grounds.
That dropsy however may be associated with debility, is what
cannot be denied. But we shall soon persuade almost
invariably find Hydrothorax in its commencement, ac-
companied with considerable degree of inflammatory excite-
ments and requiring a plan of treatment, totally different
from that pursued by most European Practitioners.
And to this error in its pathology, we may attribute
its fatality, and not to any necessary consequences of the
disease. Labouring under this opinion I now proceed to
the considerations of its causes, symptoms, and method of cure.

The predisposing Causes of this disease are various
but among the most frequent are a malformation of the
chest short thick make with a natural disposition
to corpulency to which may be added a sedentary occupa-
tion.

The exciting Causes are a too free indulgence in
malt or spiritous liquors particularly Porter Beer, and Ale.

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All causes interrupting the free circulation of blood, through the aorta, as polypus, aneurismal tumor, causing greater large quantities to be accumulated or detained to the chest, by pressing upon the large blood vessels. And also enlargements and indurations of the liver. It may also occur as the consequence of ill cured Aneurismal Asthma, and Catarrhs.

Symptoms.

This disease usually commences with difficulty in breathing accompanied with considerable oppression and tightness about the Precordia and this difficulty in respiration is easily increased upon any emotion of the mind or bodily exertions, particularly if the Patient attempts to mount on eminences or ascend an acclivity. After a while it becomes so very oppressive, as to deprive the Patient of his usual enjoyment of rest, in bed. And requires his shoulder and head to be considerably elevated in order so they are in the habit of saying to prevent suffocation, he frequently starts up out of his sleep and complains.

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1 great affection with marked palpitation the
heart. The voice is weak & hoarse and hoarse. The
face is quickly flushed, and somewhat edematous;
in the early stage manifested, considerable activity
the countenance is pale, and evinces a peculiar
agony, anxiety, and restlessness, and there is generally a
quivering of the lips. A cough attends
dyspnoea, which is at first dry, but in the more
advanced stage is accompanied with an expectoration
of a thick phlegm, or mucus. There is also a
frequent and irregular, which is productive of
more or less pain, with great thirst.

Dr Chapman says he has generally observed, that
there was more or less prostration, or muscular
numbness, in the arm of the affected side.

There is generally an Anasarca of the lower extre-
mities. Dr Cullen says, that a fluctuation of
water perceived by the patient, when changing
his position from one to another, is the most
certain symptom. There is always more or less of cyanosis present.

ST. JAMES

The following
 is intended to be
 a list of the
 names of the
 persons who
 have been
 in the
 service of
 the
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 since the
 year 1800
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 time.

Diagnosis

Two diagnoses in the early stage of the disease, will be difficult in proportion to the rapidity with which the water accumulates. But in slow and gradual increase, the symptoms will be obscurely marked. And what increases the difficulty, is the number of diseases, in the which hydrothorax is liable to be combined.

Such as Empyema, Pleurisy, &c. &c. and Asthma. But by a close attention, to the peculiarities of each, we will generally be able to distinguish them. And in the latter stage, the phenomena of this disease, will be so striking, the symptoms are neither less or extreme, as is usual in the pleurisy, we have no doubt, as to the real existence of it. (Dr. Mathews).

Appearance & Expectations upon Dissection. we find a collection of water in one or both sides of the Pleural cavity, most generally, in both accompanied by a collection, in the cellular texture.

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the principal features of the system the drug is used, as a potent stimulant and febrile properties, and it is even stated varies much in regard to quantity, which is given in large well be known, especially in cases of dyspepsia. And we are well aware that some of the above are not necessary details, particularly the dose, and these must more apt to be the case if the disease has been preceded by general anasarca.

Treatment.

Care to a patient in the early stage of dyspepsia, we should resort to venesection as the first and best step towards relieving its progress. The propriety of this mode of procedure is justified by the success which usually attends it, and by the indications of the time and accompanying symptoms. The case is well attested and recommended by the most respectable practitioners of this country. All violent measures however can be dispensed with as regards the quantity to be extracted.



This must depend upon the judgement of the Legislature
in the existing circumstances. Its aim has to be to
in any degree great advantage from the operation
of the law is to the fact of the law. Some suppose
that we shall derive greater advantage by placing
the law in the hands of the Legislature. I am not aware
that any measure is more likely to be the cause
for the law upon which the law should be applied.

We are informed that several of the most eminent
physicians of the country are in the habit of direct
ing the disease entirely in the early stage by direct
intervention. There can be no doubt as to the ability
of this particular class in our profession that
the system is not capable of maintaining a more active
position. After sufficient examinations have been
promised by the means above mentioned, we should
refer to the use of bloodletting, which should be large
enough to cover the whole of the body and as far
as an incision another should be applied as to
keep up a constant discharge, by observing this

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method we shall derive great and decisive advantage
should the disease not yield to this treatment we
should resort to leeches which is a class of remedies
unknown for this ^{intensity} in all hypochondriacal
the next is when is a combination of calomel and
squills in the proportion of 2 grains of the former
with 2 of the latter which should be given 3 or 4
times a day until a salivation is produced.

we are informed by Dr. Chapman that as soon as the
mouth becomes affected we shall have the pleurisy
and during the disease arrested and with it the hyper-
trophies of the breast and all the other local sym-
ptoms subside. This does appear somewhat extraordinary
but if the inextinguishable intensity of this combination
there can be no doubt, for we have the concurrent
testimony of several of the most eminent practitioners
of their art that comes with it. I am. all other articles
are omitted. I conclude ever yours so sincerely Thos
The cure of this disease as to be considered a specific
by means of the most eminent practitioners is a long

[illegible]

particularly by Whittier and Garrison. In latter
of whom says he has never seen a case of "brother
no longer" advanced in a periodical that "does not
lead to the use of the police, does however
does not appear to be the opinion of the Practitioners
in this country. Thus in the contrary condemn
the article as perfectly correct in this respect and
some go so far as to say it is a "good" in a journal
that such contrasts for statements are to be mean-
ing. I cannot possibly conceive that both are any
kind of "highly probable" one has been led astray
by his enthusiastic love of the article and the other
has been into the opposite extreme. That dictates
no one proceeds in a "good" in the same either does
not. There can be no doubt but the testimony is
so abundant and respectable that it certainly would
be scepticism in me to say it is entirely untrue
but that it is deserving of the high estimation proper
to a pamphlet and other European writers.



[illegible]



be considered as worthy of our attention. From the beneficial effects of emetics in most diseases of the chest. It would be reasonable to suppose, that they would be productive of good in Hydrothorax. Such however is not the case. But on the contrary they are said to aggravate the symptoms and increase the difficulty of cure. Where there is accumulations of phlegm, with difficult expectoration they might be used with evident advantage, in nauseating doses. I have now mentioned all the different remedies which will be found requisite in the treatment of this disease. And if administered with due discretion and judgment will I am persuaded be sufficient to arrest the disease and restore our Patient to health.

But before closing it may be necessary to remark that the Patient but should be low and nourishing but not stimulating, he should abstain from all spirituous liquors and as soon as he is able should take moderate exercise on horse back or in an open carriage. And above all to guard against Cold he should therefore never expose himself and should wear loose

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And in order to strengthen his system and invigorate
and give tone to his constitution. Tonics should be
employed. I deem it however unnecessary to say as to
what particular Tonics should be used. The Minerals
are however considered as the best. This however
may be left to the Practitioner.

I will now conclude by remarking that I have made
no attempt at originality as may be perceived in the
perusal of this essay. But on the contrary have
selected from many different authors such sentiments
as was consistent with my views of the subject.
and have compiled though I must confess in an im-
perfect and desultory manner for your consideration.
Not however gentlemen without being impressed
with the painful conviction of its imperfections
be I submit it for your perusal yet with a confident
hope that it will meet with that goodness and lenity
for which you are so renowned and so capable of
exercising.

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Admitted March

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